

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009484

Entity Name: CARILLON HOTEL AND SPA MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2 CONWAY PARK
150 FIELD DR. SUITE 300
LAKE FOREST, IL 60045

Current Mailing Address:

2 CONWAY PARK
150 FIELD DR. SUITE 300
LAKE FOREST, IL 60045 US

FEI Number: 26-1242663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ATLANTIC PACIFIC MANAGEMENT
622 BANYAN TRAIL
SUITE 150
BOCA RATON, FL 33431 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TOM SMITH

04/28/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name WICKY, THOMAS
Address 2 CONWAY PARK
150 FIELD DR. SUITE 300
City-State-Zip: LAKE FOREST IL 60045

Title DIRECTOR
Name AUERBACH, MARTIN
Address 2 CONWAY PARK
150 FIELD DR. SUITE 300
City-State-Zip: LAKE FOREST IL 60045

Title D
Name SCRIVENS, ANDREI
Address 2 CONWAY PARK
150 FIELD DR. SUITE 300
City-State-Zip: LAKE FOREST IL 60045

Title D
Name NATH, NEAL
Address 2 CONWAY PARK
150 FIELD DR. SUITE 300
City-State-Zip: LAKE FOREST IL 60045

Title D
Name MATTHEW, KANE
Address 2 CONWAY PARK
150 FIELD DR. SUITE 300
City-State-Zip: LAKE FOREST IL 60045

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS WICKY

DIRECTOR

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date